

Office of the State Superintendent of Education

PPE IN SCHOOLS AND CHILD CARE FACILITIES

This document presents personal protective equipment (PPE) requirements and recommendations for various higher-risk scenarios which may occur in the school or child care setting. Requirements are indicated by a red box, and recommendations are indicated by a green box. For detailed guidance on PPE in healthcare settings within schools and child care facilities, consult DC Health's Required Personal Protective Equipment (PPE) for Healthcare Facilities, available on coronavirus.dc.gov/healthguidance.

SCENARIO	DESCRIPTION	PPE
Symptoms of coronavirus (COVID-19)	Individual develops symptoms of COVID-19 while at school or child care. (Note: If an individual develops symptoms of COVID-19 during the day, they must isolate and be dismissed as soon as possible.)	• Mask
Returning from Isolation on Day 6	 Individual is returning to school or child care after isolating for five days. 	Mask through Day 10
Returning from Quarantine on Day 6	 Individual is returning to school or child care after quarantining for five days. 	Mask through Day 10
Medical or Religious Exemption to the COVID-19 Vaccine Mandate for Staff and Student-Athletes	Staff or student-athlete has an approved medical or religious exemption to the COVID-19 vaccine mandate.	Mask
Performing an aerosol-generating procedure ¹	 Staff member is in close/direct contact with less than six feet or physical distance from the student or child. AND Staff member is performing an aerosol-generating procedure. 	 Procedure mask or N95² (sometimes referred to as a respirator) Eye protection (face shield or goggles)
Supervising a sick student or child who is suspected or known to have COVID-19	Staff member is staying with the sick student or child in the isolation room while they await pick-up by the parent/guardian.	 Procedure mask or N95² Eye protection Gown/coverall Gloves
Administering a COVID-19 test	Staff member is physically administering a COVID-19 test to another individual.	 Procedure mask or N95² Eye protection Gown/coverall Gloves

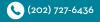
Notes:

- These guidelines do not replace professional judgment, which should always be used to ensure the safest environment.
- Staff and students/children should practice good hand hygiene throughout all scenarios.
- Wearing gloves is not a substitute for good hand hygiene. Gloves should be changed between students/children and care
 activities, and hand hygiene should be performed between glove changes. If skin comes into contact with any secretions or bodily
 fluids, it should be immediately washed. Contaminated clothing should be immediately removed and changed.
- A large, button-down, long-sleeved shirt may be used as a coverall.
- To be effective, masks must be worn correctly, covering the nose and mouth completely and with no gaps around the edges.

² Any individual using an N95 must have access to a comprehensive Respirator Fit Testing program. An individual who has not completed a Respirator Fit Testing program must NOT wear an N95.









¹ Per the Centers for Disease Control and Prevention, aerosol-generating procedures include administering nebulized medication, open suctioning of airways, sputum induction, cardiopulmonary resuscitation, endotracheal intubation and extubation, non-invasive ventilation (e.g., BiPAP, CPAP), bronchoscopy, and manual ventilation.